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APPLICATION NO.	FILING DATE	FIRST NAM	MED INVENTOR	ATTORNEY DOCKET N	IO. CONFIRMATION NO.	
10/524,945	02/16/2005	Farha	nd Parhami	58086-241892	3129	
TITLE OF INVENTION	: AGENTS AND I	METHODS FOR ENHANC	CING BONE FORMAT	TION		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FI	EE TOTAL FEE(S) DUE	DATE DUE	
Non-Provisional	yes	\$755.00	\$300,00	\$1,055.00	01/22/2011	
EXAMI	NER	ART UNIT	CLASS-SUBCLAS	SS		
M. Leavitt		1633		<del></del>		
1. Change of corresponde Address" (37 CFR 1.363)	).	(1) the n	ting on the patent front pames of up to 3 re	gistered patent 1 Venable	LLP	
	espondence address (or Address form PTO/SB/I	22) attached. (2) the nam	r agents OR, alternative ne of a single firm (havi	ng as a member 2 Nancy J.	Axelrod, Ph.D.	
form PTO/SB/47; Rev 03-02 or more recent) attached. up to 2 registered paten			istered patent attorneys	agent) and the names of t attorneys or agents. If no  3 Michael A. Gollin		
	er Number is required	•				
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(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
The Regents of the University of California Oakland, California						
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual X Corporation or other private group entity Government						
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x Issue Fee A check in the amount of the fee(s) is enclosed.						
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5. Change in Entity Stat	tus (from status indicate	d above)				
a. Applicant claim	ns SMALL ENTITY sta	tus. See 37 CFR 1.27.	b. Applicant is no l	onger claiming SMALL ENTITY	status. See 37 CFR 1.27(g)(2).	
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Authorized Signature Namy Arma				Date	January 19, 2011	
Typed or printed name Nancy J. Axelrod, Ph.D.				Registration No.	44,014	
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